PATENT APPLICATION FEE DETERMINATION RECOF Effective December 8, 2004								ORD	Application or Docket Number				
CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
119	NATIONAL	TAGE EEES	(Colum	n 1)		(Column 2)		7475		1		T	
U.S. NATIONAL STAGE FEES								RATE	FEE	l	RATE	FEE	
BASIC FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)-		<u></u>	SE ENT. = \$ 300		BASIC FEE	150	OR	BASIC FEE		
EXAMINATION FEE			(4) = \$ 50 / \$ 100 U.S. is ISA = \$ 50 / \$ 100			100 / \$ 200		EXAM. FEE	100		EXAM. FEE		
SEARCH FEE			ALL other countries = \$ 200 / \$ 400			her situations = 250 / \$ 500		SEARCH FEE	200		SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.			min	us 100 =	/ 50 =			X \$ 125 =			X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			(O minus 20 =		•	/		X \$ 25 =		OR	X \$ 50 =		
IND	EPENDENT CL	AIMS	3 minus 3 =		• ,	/		X \$ 100 =		OR	X \$ 200 =		
MUL	TIPLE DEPEN	DENT CLAIM PRI	ESENT					+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	450	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	• /0	Minus	-2	0	- 0		X \$ 25 =	\bigcirc	OR	X \$ 50 =		
	Independent	• 3	Minus .	***	3	- 0		X \$ 100 =	0	OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =	0	OR	+ \$ 360 =		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)	ſ	<u> </u>		1			
AMENDMENT 8		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		8		X \$ 25 =		OR	X \$ 50 =		
	Independent	•	Minus	***		8		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l	+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-875 (Rev. 02/2005)

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